PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. NEU-5009 Attorney Docket Number **DECLARATION** AND **POWER OF ATTORNEY** First Named Inventor Marrs FOR UTILITY OR DESIGN COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number □ Declaration Submitted with □ Declaration Submitted after Filing Date Initial Filing (Surcharge OR Initial Filing (37 CFR 1.16(e)) required) Group Art Unit **Examiner Name** As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: STABILIZED COMPOSITIONS CONTAINING AN OXYGEN-LABILE ACTIVE AGENT AND LACTOGLOBULIN (Title of the Invention) the specification of which is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. **Certified Copy Priority** Foreign Filing Date **Prior Foreign Not Claimed** Attached? (MM/DD/YYYY) **Application** Country NO YES Number(s)

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLAR	ATION - Utility or Design Patent Ap	plication
I hereby claim the benefit under 35 U.S.C	. 119(e) of any United States provisional a	application(s) listed below.
Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional applica numbers are listed on a supplemental priority data she PTO/SB/02B attached hereto
as the subject matter of each of the claims of provided by the first paragraph of Title 35, Udefined in Title 37, Code of Federal Regula national or PCT international filing date of the		r United States application in the manne e duty to disclose material information
Application Serial No.	Filing Date	Status
		Patented Patented Patented
<ul> <li>✓ Practitioners at Customer Number</li> <li>✓ AND</li> <li>✓ Practitioner(s) named below: Name</li> </ul>	000027777 →  Registration Number	Place Customer Number Bar Code Label Here
as my/our attorney(s) or agent(s) to prose States Patent and Trademark Office conn Address all telephone calls to William E. McGowa		to transact all business in the United
	mer Number Code Label 000027777 OR	☐ Correspondence address below
Name:		
Address:		
Address:		
City:	State:	ZIP
Country	Telephone:	Fax:

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NAME OF SOLE OR FIRST INVENTOR:	☐ A pe	A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Christopher		Family Name or Surname	Marrs		
Inventor's Signature			Date		
Residence: City Foothill Ranch	State CA	Coun	ry USA	CitizenshipUSA	
Mailing Address 2 Parterre Avenue	<del></del>				
City Foothill Ranch I hereby declare that all statements ma	State CA	ZIP 9		Country USA	
NAME OF SECOND INVENTOR:  Given Name (first and middle [if any])	Д Ар	Family Name or Surname	ed for this un	signed inventor	
	·· <u>·</u>		<del>,</del>		
Inventor's Signature			Date		
Residence: City	State	Coun	try	Citizenship	
Mailing Address					
City	State	ZIP		Country	
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